



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 3767

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/511,384	04/27/2005	424	1644	976-19 PCT/US
<b>RULE</b>				
<b>APPLICANTS</b> Monica Bequet Romero, Ciudad de la Habana, CUBA; Boris Ernesto Acevedo Castro, Ciudad de La Habana, CUBA; Jorge Victor Gavilondo Cowley, Ciudad de La Habana, CUBA; Luis Enrique Fernandez Molina, Ciudad de La Habana, CUBA; Omar Lopez Ocejo, Ciudad de La Habana, CUBA; Ricardo de la Caridad Silva Rodriguez, Ciudad de La Habana, CUBA; Alexis Musachio Lasa, Mariel, CUBA; Ernesto Galban Rodriguez, Ciudad de La Habana, CUBA; Dania Marcia Vazquez Blomquist, Ciudad de La Habana, CUBA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CU03/00004 04/11/2003				
<b>** FOREIGN APPLICATIONS *****</b> CUBA CU2002/0076 04/15/2002				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/PHUONG N HUYNH/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CUBA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 88
				<b>INDEPENDENT CLAIMS</b> 32
<b>ADDRESS</b> Ronald J Baron Hoffmann & Baron 6900 Jericho Turnpike Syosset, NY 11791 UNITED STATES				
<b>TITLE</b> Active antiangiogenic therapy				
<b>FILING FEE RECEIVED</b> 2503	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	